

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under
37 C.F.R. 1.53(b))

Attorney Docket No. 0100.2061-000

First Named Inventor or Application Identifier Paul E. Amundsen

Express Mail Label No. EV 215730973 US

Title of Invention Fail-Safe Cryopump Safety Purge Delay

7538 U.S. PTO
10 608779
06/27/03

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

1. <input type="checkbox"/> Fee Transmittal Form <i>(Submit an original, and a duplicate for fee processing)</i>	6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>
2. <input checked="" type="checkbox"/> Specification Total Pages [30] <i>(preferred arrangement set forth below)</i>	a. <input type="checkbox"/> Computer Readable Form
- Descriptive title of the invention	b. <input type="checkbox"/> Paper Copy (identical to computer copy)
- Cross References to Related Applications	[] Pages
- Statement Regarding Fed sponsored R & D	c. <input type="checkbox"/> Statements verifying identity of above copies
- Reference to sequence listing, a table, or a computer program listing appendix	
- Background of the Invention	
- Brief Summary of the Invention	
- Brief Description of the Drawings <i>(if filed)</i>	
- Detailed Description	
- Claim(s)	
- Abstract of the Disclosure	
3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets [6] [X] Fig. of the Drawings for Publication [4] [] No Figure to be Published	7. <input type="checkbox"/> Assignment Papers (cover sheet & documents) [X] Assignee - Helix Technology Corporation Mansfield, MA 02048
4. <input type="checkbox"/> Oath or Declaration Total Pages []	8. <input type="checkbox"/> Power of Attorney <input type="checkbox"/> 37 C.F.R. 3.73(b) Statement
a. <input type="checkbox"/> Newly executed (original or copy)	9. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. 1.63(d)) <i>(for continuation/divisional with Box 17 completed)</i>	10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. 1.63(d)(2) and 1.33(b).	11. <input type="checkbox"/> Preliminary Amendment
5. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i>	12. <input checked="" type="checkbox"/> Return Receipt Postcard
	13. <input type="checkbox"/> Small Entity Statement(s)
	14a. <input type="checkbox"/> Foreign Priority Claim under 35 U.S.C. §119 or 365
	14b. <input type="checkbox"/> Certified Copy of Priority Document(s)
	15. <input type="checkbox"/> Nonpublication Request <i>(check parent application)</i>
	16. <input type="checkbox"/> Other _____

ACCOMPANYING APPLICATION PARTS

17. If a CONTINUING APPLICATION, check appropriate box; supply the requisite information.

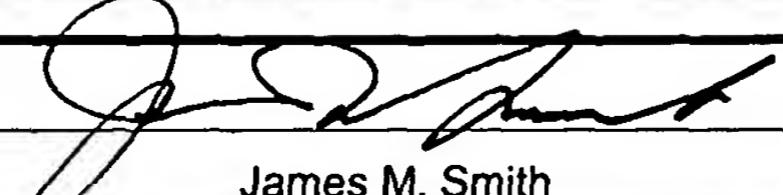
Continuation Divisional Continuation-in-part (CIP) of prior application No.:

Prior application information: Examiner: Group Art Unit:

The entire disclosure of the prior application is considered a part of the disclosure of the accompanying application and is hereby incorporated by reference.
(Add standard Related Applications section with incorporation by reference to specification or update same)

18. CORRESPONDENCE ADDRESS

NAME	Customer No. 021005 HAMILTON, BROOK, SMITH & REYNOLDS, P.C.				
ADDRESS	530 Virginia Road, P.O. Box 9133				
CITY	Concord	STATE	MA	ZIP CODE	01742-9133
COUNTRY	USA	TELEPHONE	(978) 341-0036	FAX	(978) 341-0136

Signature		Date	6/27/03
Submitted by Typed or Printed Name	James M. Smith	Reg. Number	28,043